	A							~.	(\bigcirc^{c}	71	129	,800	
•									Application or Docket Number					
	.PATENT A	RD						. 1						
Effective October 1, 2000 CLAIMS AS FILED - PART I										<u>37.5</u>	- 18	10-1	7—1	
		CLAIMS AS	· Column)	SMALL TYPE	ENT	ITY	OR	OTHER						
TC	TAL CLAIMS		2<	.,	(Cotumn 2)			RATE FEE			RATE	FEE		
FO	я		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 3	55.00	OR	Basic Fee	710.00	
10	TAL CHARGEA	BLE CLAIMS	35 minus 20 =		• 15			X3 9=	†		OR	XS18=	>#s	
INC	EPENDENT CL	AIMS	minus 3 =		. 4			X40=	+			X80=	320	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT						╁		OR		1250	
* If the difference in column 1 is less than zero, enter *0* in column 2								+135	4		OR	+270=	13.00	
•											OR	OTHER	(30)	
CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cotumn 3)								SMAL	LEN	ПП	OR	SMALL		
AMENDMENTA	•	CLAIMS REMAINING		HIGH		PRESENT	l	RATE		ADDI- TIONAL		RATE	'ADDI- TIONAL	
		AFTER AMENDMENT			POR POR	EXTRA		TAIE	_['	FEE		NAIE	FEE	
	Total	. 39	Minus	- 3	5	- Y		X\$ 9=			OR	X\$18=	3075	
ME	Independent	• 7	Minus	7		·Ø		X40=			OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR	+270=		
								YOY	u l			TOTAL ADDIT. FEE		
	•	(Column 1)		(Cobs	mn 2)	(Column 3)		ADDIT, FE	EL		,	ADDIT. FEE	4	
AMENDMENT B	CLAIMS REMAININ		HIG		HEST BER PRESENT		1			ADDI-			ADDI-	
	٠	AFTER AMENDMENT		PREVI	OUSLY FOR	EXTRA		RATE	T	IONAL FEE	·	RATE	TIONAL FEE	
	Total	. 37	Minus	. !	39	- /] [;	X\$ 9=	T	1	OR	X\$18=	1.	
	Independent	. 7	Minus	***	7	= /	X40		†	+	OR	X80=	/	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	1	+-	•	+270=		
RCE 2/2/06									+	+-	OR	TOTAL		
									ε 느		JUN	ADDIT. FEE		
<u></u>		(Column 1) CLAIMS		Higi	mn 2)	(Column 3)	ጎ ሰ		ADDI-	DDI-	7		ADDI-	
AMENDMENT C		REMAINING AFTER AMENOMENT		PAEVI	BEA OUSLY	PRESENT EXTRA		RATE	T	IONAL		RATE	TIONAL	
	Total	. 37	Minus '		FOR 39		1	X\$ 9=	Т	FEE		X\$18=	FEE	
	Independent	• 0	Minus	***	5		1	X40=	十		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A4UB	╬		OR	/	}	
	H the entry le ook.		+135=			OR	A270=							
" If the entry in column 1 is less than the entry in column 2, write "O" in column 3. " If the "Highest Number Previously Poid For" IN THIS SPACE is less than 20, exter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE														
		ber Previously Pa					er for	and in the	appro	od etską	x in co	lumn 1.		